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Clovco Hamiltok	۸۱	(Depositor's name
Duro	nothin	(Signature
May\9. 2005		(Date

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.			
10/050,289	01/16/2002	Richard B. Mailman	3220-69768	7025	•		
TITLE OF INVENTION: METHOD OF TREATMENT OF DOPAMINE-RELATED DYSFUNCTION							
		•					

APPLN. TYPE	TYPE SMALL ENTITY ISSUE FEE		EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700		\$300	\$1000	06/09/2005
EXAM	MINER	ART UN	IT	CLASS-SUBCLASS]	
KIM, JENNIFER M		1617		514-284000		
CFR 1.363). Change of corresponded ress form PTO/SB/1 "Fee Address" indication PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND	tion (or "Fee Address" Indica or more recent) attached. Us D RESIDENCE DATA TO B	Correspondence ation form e of a Customer	(1) the na or agents (2) the na registered 2 registere listed, no	nting on the patent front page, limes of up to 3 registered pater OR, alternatively, me of a single firm (having as a attorney or agent) and the named patent attorneys or agents. If name will be printed. T (print or type) Dear on the patent. If an assign for filing an assignment.	n member a es of up to no name is 3	& Thornburg LLP
(A) NAME OF ASSIGN Purdue Researc University of	EE h Foundation North Carolina at ((B Chapel Hill	RESIDENC West La Chapel	for filing an assignment. CE: (CITY and STATE OR COU afayette, IN Hill, NC batent): Individual Co	JNTRY)	_
4a. The following fee(s) are	enclosed:	4b	. Payment of	Fee(s):		
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Publication Fee (No s	small entity discount permitte	ed)	Payment	by credit card. Form PTO-2038	is attached.	
Advance Order - # o	f Copies		The Direction Deposit Acc	ector is hereby authorized by clount Number <u>10-0435</u>	harge the required fee(s), or (enclose an extra o	
a. Applicant claims S	(from status indicated above MALL ENTITY status. See	37 CFR 1.27.		cant is no longer claiming SMAI		19717
NOTE: The Issue Fee and P interest as shown by the reco	is requested to apply the Issumble is the Issumble of the United States Pates of the United States Pates	ie Fee and Publicat will not be accepted ent and Trademark	Ion Fee (II ar I from anyone Office.	ny) or to re-apply any previously e other than the applicant; a regi	y paid issue fee to the applic stered attorney or agent; or t	he assignee or other party in
Authorized Signature	19n S.4	Jan-		Date	May 9, 2005	
Typed or printed name	Kevin I Mclare	n		Registration	No. 48 351	

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